PRART B - FEE(S) TRANSMITTAL								
-	his form, together wi	ll plicale fe	ee(s), to: <u>N</u>	<u>Iail</u> M C	ail Stop ISSUL ommissioner fo O. Box 1450	EE or Patents		
14.	AU6	9 2004	_	A	lexandria, Virg	inia 22313-1450		
<u>. A.</u>			or]		03) 746-4000			
INSTRUCTIONS: This for appropriate. All further con indicated unless corrected maintenance fee notification	rm should be used for transcriptions in the respondence including the below or directed otherwise as.	smitting he ISSU advance or in Block I, by (a	E FEE and ders and noti) specifying	PUBLICAT ification of a new corre	TON FEE (if requi maintenance fees w spondence address;	red). Blocks 1 through 5 vill be mailed to the curren and/or (b) indicating a sep	should be completed what correspondence address arate "FEE ADDRESS"	
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APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/932,659	08/17/2001	Denise Minnigh				208802/016	4573	
TITLE OF INVENTION: IMAGING PLATE CASSETTE FOR EXTENDED X-RAY PHOTOGRAPHS								
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APPLN. TYPE	SMALL ENTITY	ISSUE FI	ISSUE FEE		ICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330			\$300	\$1630	10/15/2004	
EXAMINER		ART UNIT		CLAS	S-SUBCLASS			
SONG, HOON K				37	8-174000			
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list								
CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2)				
☐ "Fee Address" indicati PTO/SB/47; Rev 03-02 (Number is required.	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
FWJIFILM Medical Systems, U.S.A., Inc. Stamford, CT								
The second of second seconds and second seco								
Please check the appropriate assignee category or categories (will not be printed on the patent);								
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fe						1 1		
					the amount of the fee(s) is enclosed. credit card. Form PTO-2038 is attached.			
40								
Deposit Account Number 19-4709 (enclose an extra copy							copy of this form).	
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).								
The Director of the USPTO	is requested to apply the Issu	ie Fee and Publicat	ion Fee (if an	y) or to re-a	apply any previously	v paid issue fee to the applic	ation identified above	
NOTE: The Issue Fee and Pinterest as shown by the reco	ublication Fee (if required) v	vill not be accepted ent and Trademark	from anyone	e other than	the applicant; a regi	stered attorney or agent; or	the assignee or other part	
Authorited Signarus) Reg. Wb. 32,716 (Date) August 6, 2004								
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.								
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